## STATE OF SOUTH DAKOTA

## STATE OF SOUTH DAKOTA S.D. SEC. OF STATE Statement of Legal Newspaper Ownership and Circulation

Return to: Secretary of State, 500 I	E. Capitol, Pierre, SD 575	01-5077
1. TITLE OF NEWSPAPER REPORTER :	Farmer	2. DATE 9/24/19
3. FREQUENCY OF ISSUE 3A, NO. OF ISSUES PUBLIS	HED ANNUALLY 3B.	ANNUAL SUBSCRIPTION
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers)		
- 516 main St WEBSTER SD (7274		
PUBLISHER (Not printers)		
6. FULL NAME OF PUBLISHER:		
7040		e Ann Suhr
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.		
FULL NAME COMPLETE MAILING ADDRESS		
8. KNOWN BONDHOLDERS, MORIGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING I PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so		
state. If more space is needed, list on back of this form.		
9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. COPIES EACH ISSUED PRECEDING 12	ACTUAL NO. COPIES
A. TOTAL NO. COPIES (Net Press Run Plus Paid Electronic Copies)	MONTHS 2124	O I I. C
B.PAID AND/OR REQUESTED CIRCULATION	4141	2166
Sales through dealers and carriers, street vendors, and counter sales.	744	798
Mail Subscription     (Paid and or requested)	1131	1131
3. Paid Electronic Copies	68	68
C.TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1, 9B2 and 9B3.)	1943	1997
D.FREE DISTRIBUTION  1. BY MAIL, CARRIER OR OTHER MEANS	41	-11
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES		-
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	1984	2038
F. COPIES NOT DISTRIBUTED  1. Office use, left over, unaccounted, spoiled after printing	13	12
2, Return from News Agents	130	118
G. TOTAL (Sum of E, F1 and F2 - Should equal total shown in A.)	2124	2166
Statement must be signed by Publisher, Business Manag I swear that the statements made by me are true, c	7.1	sence of a Notary Public
	Publishe	- / President
(Signature) (Title)		
State of South Dakota  Sworn to before me this 4 day of 2014		
County of		
Seab Shelley Deutsch 5 My commission expires: My Commission Expires		

Form: SOS REC 051 9/2016

JOHN & CEANN SULV 619 & 12= Aug Wossian SD 57274

The Market Star